

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/593,064

FILING DATE

9-15-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1-				
3	1	-				
4	3					
5	1	-				
6	1	-				
7	1	-				
8	1	-				
9	1	-				
10	8	-				
11	1	-				
12	1	-				
13	1	-				
14	1	-				
15	1	-				
16	1	-				
17	1	-				
18	1					
19	1	-				
20	1					
21	1					
22	1	-				
23	2					
24	2					
25	2					
26	2					
27	1	-				
28	1	-				
29	1	-				
30	8	1	-			
31	1	-				
32	1	-				
33	1	-				
34	1	-				
35	1					
36						
37						
38						
39						
40						
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45						
46						
47						
48						
49						
50						
TOTAL IND.	4		↓		↓	↓
TOTAL DEP.	37	←		←	←	
TOTAL CLAIMS	41					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
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96						
97						
98						
99						
100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		←		←	←	←
TOTAL CLAIMS						